JAN 16 2007

PTO/SB/21 (09-

Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

10/807.695 Application Number TRANSMITTAL March 24, 2004 Filing Date **FORM** NILFORUSHAN, Ali First Named Inventor 3643 Art Unit **Examiner Name** NGUYEN, Son T. (to be used for all correspondence after initial filing) RCVR 1043274 [8048-002-US] Attorney Docket Number

| 100 | al Number of Pages in 1 | riis Submission | 13 | , titorney Booket Hun | iso. IXCVIX | 104321 | 7 [00 | +0-002-00] | |
|---|--|--|--------------|---|--|--------|---------|-------------------------------|--|
| ENCLOSURES (Check all that apply) | | | | | | | | | |
| \boxtimes | Fee Transmittal Fo | orm | | Drawing(s) | | | After A | Allowance Communication to TC | |
| | Fee Attach Amendment/Reply After Final | ned declaration(s) Request ment Request | | Petition Petition to Convert to a Provisional Application Power of Attorney, Rev Change of Correspondent Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table | I Communication to Board reals and Interferences I Communication to TC I Notice, Brief, Reply Brief) etary Information Letter Enclosure(s) (please Identify in Postcard | | | | |
| | Document(s) Reply to Missing P Incomplete Applica Reply to M | Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | arks | | | | · | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | | | | |
| Firm N | lame Gordoi | n & Rees LLP | _ | | | | | | |
| Signature 1 - 12 | | | | | | | | | |
| Printed name Lin Yu, Ph.D. | | | | | | | | | |
| Date | Date / _ / _ | | -07 Reg. No. | | | 57,083 | | | |
| CERTIFICATE OF TRANSMISSION/MAILING | | | | | | | | | |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | | | | | | | |
| Signature Sev | | | verly Erdman | | | | | | |
| Typed or printed name Beverly Erdm. | | | | | | Date | 1-11.07 | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Beverly Erdman

Typed or printed name

[-[[.0]

PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
TWO Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| 1 10 100 101 | | | | | | | | | |
|--|----------------------------|----------------------------|---------------------------|---|------------------|---------------------|--|--|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | Complete If Known | | | | | |
| FOLDENINZ | | | Application Number | 10/807, | 10/807,695 | | | | |
| FEE TR | ANS | MITTA | 4L | Filing Date | March 2 | March 24, 2004 | | | |
| for | 06 | | First Named Inventor | NILFO | NILFORUSHAN, Ali | | | | |
| 101 | | | Examiner Name | | NGUYEN, Son T. | | | | |
| Applicant claims small | See 37 CFR 1.27 | • | Art Unit | 3643 | 3643 | | | | |
| TOTAL AMOUNT OF PA | YMENT | (\$)510 | | Attorney Docket No. | | 1043274 [80 | 48-002-US] | | |
| METHOD OF PAYMEN | IT (check all | that apply) | | | | | | | |
| Check Credit | Card 1 | Money Order | Non | e Other (please i | dentify): | | | | |
| Deposit Account | | • | <u> </u> | Deposit Account | | n & Rees LLP | | | |
| | • | | | eby authorized to: (chec | | | | | |
| | • | , | | | | | a filing for | | |
| |) indicated belo | ow) or underpayme | nte of fools | a) 🔽 | | ow, except for th | le filing fee | | |
| under 37 CFF | R 1.16 and 1.1 | 7 | | Credit any ove | | | | | |
| WARNING: Information on t | | | edit card inf | ormation should not be in | cluded on this | form. Provide cre | dit card | | |
| FEE CALCULATION | (All the fees | below are du | e upon fi | ling or may be subje | ect to a sure | charge.) | | | |
| 1. BASIC FILING, SEA | | | | | | | | | |
| , | FILING F | | | RCH FEES | EXAMINA | ATION FEES | | | |
| | | mall Entity | | Small Entity | | Small Entity | | | |
| Application Type | Fee (\$) | Fee (\$) | <u>Fee (\$</u> |) <u>Fee (\$)</u> | Fee (\$) | Fee (\$) | Fees Paid (\$) | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | and the second s | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | |
| 2. EXCESS CLAIM FE | ES | | | | | <u> </u> | Small Entity | | |
| Fee Description | | | | | | Fee (\$) | Fee (\$) | | |
| Each claim over 20 (inc | | | | | | 50 | 25 | | |
| Each independent claim | , | luding Reissue | s) | | | 200 | 100 | | |
| Multiple dependent cla | | : - | (¢) Fo | an Baid (A) | | 360 | 180 ende <u>nt Claims</u> | | |
| Total Claims - 20 or HF | Extra Cla | <u>ims</u> <u>Fee</u> x | (2) = <u>Fe</u> | es Paid (\$) | | Fee (\$) | Fee Paid (\$) | | |
| HP = highest number of total of | | | | | | | | | |
| Indep. Claims | Extra Cla | _ | <u>(\$)</u> <u>Fe</u> | es Paid (\$) | | | | | |
| 3 or HP | = | x | =_ | | | | | | |
| HP = highest number of indep | endent claims p | aid for, if greater th | an 3 | | | | | | |
| 3. APPLICATION SIZE | | | | | | | | | |
| | | | | paper (excluding elec | | | | | |
| | | | | due is \$250 (\$125 fo | r small entit | y) for each add | itional 50 | | |
| | hereof. See xtra Sheets | 33 U.S.C. 41(a | 1)(1)(G) a per of each | nd 37 CFR 1.16(s). n additional 50 or fracti | on thereof | Fee (\$) | Fee Paid (\$) | | |
| - 100 = | .Alia Glieele | /50= | | ound up to a whole num | | . 00 141 | = | | |
| 4. OTHER FEE(S) | | - | · · | | | | Fee Paid (\$) | | |

| SUBMITTED BY | | | | | | | |
|-------------------|------|---------|----------------|----|--|---------|------------------|
| Signature | | | 4 | k_ | Registration No. 57,083 (Attorney/Agent) | Telepho | one 619-696-6700 |
| Name (Print/Type) | LINY | U Ph.D. | \overline{C} | | | Date | 1-11-07 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 3 month extension fee (small entity)

510